POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		7533	
O.I.P.E. CLASSIFIER			10 2-23-00
FORMALITY REVIEW		05085	4
RESPONSE FORMALITY REVIEW		65085	5 3

INDEX OF CLAIMS

✔	.... Rejected		N	.... Non-elected
=	.... Allowed		I	.... Interference
—	(Through numeral)... Canceled		A	.... Appeal
÷	.... Restricted		O	.... Objected

Claim Final	Claim Original	Date											
	1	÷	N	N	N	N							
	2	✔	✔	✔									
	3	✔	✔										
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	6	✔	✔	✔									
	7	✔	✔										
	8	✔	✔	✔	N								
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Claim Final	Claim Original	Date
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If more than 150 claims or 10 actions
staple additional sh et here

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